PTO/SB/17 (10-07)
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		or 1990, no person are requ	led to respond to a c		nplete if Knov		OMB CONTROL INC
Effectiv Fees pursuant to the Consolidat			10/505,406-Conf. #8973				
FEE TRA	Filing Date		March 28, 2005				
	First Named In	ventor	Satoshi OKADA				
For	Examiner Name		J. B. Amin				
Applicant claims small	Art Unit 2628						
TOTAL AMOUNT OF PAYMENT (\$) 930.00					0717-0525PU	<u> </u>	_
7 tabling bolioties.							
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order Other (please identify):							
x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee							
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17							
FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILI	NG FEES SE. <u>Small Entity</u>	ARCH FEES Small Entity	EXAMIN	NATION FEES Small Entity		
Application Type	Fee (\$)	Fee (\$) Fee (\$		Fee (\$)		<u>Fees P</u>	aid (\$)
Utility	310	155 510	255	210	105		
Design	210	105 100	50	130	65		
Plant	210	105 310	155	160	80		
Reissue	310	155 510	255	620	310		
Provisional	210	105 0	0	0	0		
2. EXCESS CLAIM FEES							Small Entity
Fee (\$) Fee (\$)							
Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues)						50	25
Multiple dependent claims						210	105
						370	185
7							
HP = highest number of total claims paid for, if greater than 20.							
Indep. Cialms							
33 = 0 x =							
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)							
- 100 = /50 = (round up to a whole number) x =							
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late fitting surcharge): 1801 Request for continued examination (RCE) (see 37 810.00 1251 Extension for response within first month 120.00							
SUBMITTED BY							
Signature	$\nabla \theta$, #40439	Registration No. (Attomey/Agent)	39,491	Telephone	(703) 205	-8000
Name (D)						August 4,	